

EXPORT IMPORT BANK OF THE UNITED STATES SHORT-TERM MULTI-BUYER EXPORT CREDIT INSURANCE POLICY APPLICATION

Applicant: _____ dba: _____

Contact: _____ Title: _____ Website: _____

Address: _____

Phone: _____ Fax: _____ E-Mail: _____

Indicate (Not Required) if owned by a Woman or Ethnic Minority, describe: _____

Bank credit line (if any) with: _____ Broker: _____

1. How did you learn about Ex-Im Bank? Ex-Im Bank regional office Broker Bank US Export Assistance Center
 Ex-Im Bank City/State Partner _____ Other _____

2. Have you ever applied for a U.S. Small Business Administration or Ex-Im Bank program? Yes or No

If so, please name the agency, program, outcome and status: _____

If you wish to insure sales made by your affiliates, please see Question 17 (Additional Named Insureds) prior to continuing.

3. Primary reason for application: risk mitigation financing extend more competitive terms

4. Policy Aggregate Limit Requested: \$ _____ (maximum export credit receivables outstanding at any one time)

5. Product and/or services to be exported: _____

6. Are the products* to be covered under the policy:

- Manufactured in the U.S. with a minimum of 51% U.S. content (excluding mark-up)? Yes or No
- Manufactured by the applicant? (If no, provide a list of suppliers with addresses.) Yes or No
- Shipped from the United States to your buyers? Yes or No
- Listed on the U.S. Munitions List (part 121 of title 22 of the Code of Federal Reg.)? No or Yes
- Used? (If yes, please attach Used Equipment Questionnaire EBD-M-25) No or Yes

* The Borrower, Guarantor, Buyer and End User must be foreign entities in countries for which Ex-Im is able to provide support, see Ex-Im's Country Limitation Schedule (CLS) at www.exim.gov. There may not be trade measures against them under Section 201 of the Trade Act of 1974, see <http://dockets.usitc.gov/eol/public/> click on 201. There may not be trade sanctions in force against them. For a list of products and countries with Anti-Dumping or Countervailing Duty sanctions see <http://205.197.120.60/oinv/sunset.nsf/AllDocID/96DAF5A6C0C5290985256A0A004DEE7D>.

7. # of years exporting: _____ # of years exporting on terms other than cash in advance (CIA) or confirmed L/C (CILC): _____

8. Total export sales for the prior 2 years: Year: _____ \$ _____ Year: _____ \$ _____
Total export *credit* sales (exclude CIA, CILC) for the prior 2 years: \$ _____ \$ _____

9. Buyer Types: _____% Manufacturers _____% Wholesalers/ Distributors _____% Retailers _____% End-users

10. Export Credit Portfolio - attach additional pages if necessary.

Country	PREVIOUS YEAR			PROJECTIONS FOR NEXT YEAR		
	# of Buyers	Sales	Payment Terms	# of Buyers	Sales	Payment Terms
EXAMPLE: Mexico	10	\$2,500,000	50% CILC 50% 60 day OA	12	\$3,000,000	100% 60 day OA

11. Please list your 5 largest export buyers:

Buyer Name	City/Country	Last 12 Months Sales	Payment Terms	Credit Limit Needed
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$

12. Name(s) of export credit decision maker(s): Title(s): Years of Credit Experience Years of Foreign Credit Exp.

13. At what point do you stop shipping to a past due account? _____ days past due

14. Total export receivables outstanding: \$ _____ at ____/____/____ (date should be within 60 days of the application)

\$ _____ \$ _____ \$ _____ \$ _____ \$ _____

Current 1-60 days past due 61-90 days past due 91-180 days past due 181+ days past due

For each buyer over 60 days past due, attach an explanation including: name of buyer, country, amount past due, due date, and collection efforts made.

15. Export credit losses per year or rescheduled debts during each of last three years - attach additional pages if necessary.

YEAR	AMOUNT (US\$)	EXPLANATION OF LOSS OR RESCHEDULING (SPECIFY REASON, COUNTRY, AND BUYER)
	\$	
	\$	
	\$	

16. Please submit the following as Attachments:

- Credit Report on your company dated within 6 months of the application or attach a check for \$35 payable to Ex-Im Bank.
- Your financial statements for the two most recent completed fiscal years (with notes if available).
- Resume(s) on each credit decision maker identified in question 12.
- Descriptive product brochures (if available).

17. Special Coverages Required: If "none" check N/A

- Add Additional Named Insureds (ANI's).** Credit decisions of each affiliate listed must be centralized with the Applicant and each affiliate must invoice export credit sales in their own name (or tradestyle); if either is not applicable, please attach an explanation. Questions 3-15 should include export sales of prospective ANI's.

Affiliate Company / Trade style	City / State / Country	Relationship to Applicant

- Services (Please attach a copy of your sample services contract)** Services must be: performed by U.S. based personnel or those temporarily domiciled overseas, and billed (invoiced) separately from any product sales.
- Enhanced Assignment** of small business insurance policy proceeds. This is exporter performance risk protection that may be offered to lenders willing to finance Ex-Im Bank insured receivables. **Applicant Please Attach:**
- Written bank reference describing your relationship to date and size of existing credit line.
 - 2 written trade references from principal commercial suppliers.
 - For applications with policy limits over \$500,000, financial statements must be audited or CPA reviewed with notes.
- Other** (please specify): _____

The Applicant (it) CERTIFIES and ACKNOWLEDGES to the Export-Import Bank of the United States (the Bank) that:

- a) it is either organized, or registered to do **business, in the United States.**
- b) it and each additional named insured applicant **has not entered into any contract of insurance** or indemnity in respect of any case of loss covered by the Export Credit Insurance Policy or Loss chargeable to a deductible under such Policy, and the applicant will not enter into any such contract of insurance or indemnity without the Bank's consent in writing.
- c) neither it nor any of its principals is currently, nor has been within the preceding three years:
 - debarred, suspended or declared ineligible from participating in any Covered Transaction or
 - formally proposed for debarment, with a final determination still pending;
 - voluntarily excluded from participation in a Covered Transaction; or
 - indicted, convicted or had a civil judgment rendered against itfor any of the offenses listed in the Regulations governing Debarment and Suspension as defined in the Government Wide Nonprocurement Debarment and Suspension Regulations; Common Rule 53 Fed. Reg. 19204 (1988). It further certifies that it has not nor will it knowingly enter into any agreement in connection with this Policy with any individual or entity that has been subject to any of the above.
- d) it is not delinquent on any amount due and owing to the U.S. Government, its agencies, or instrumentalities as of the date of this application.
- e) it shall complete and submit standard form-LLL, "Disclosure Form to Report Lobbying" to the Bank (31 USC 1352), if any funds have been paid or will be paid to any person for influencing or attempting to influence i) an officer or employee of any agency, ii) a Member of Congress or a Member's employee, or iii) an officer or employee of Congress in connection with this Policy. This does not apply to insurance broker commissions paid by the Bank.
- f) it has not, and will not, engage in any activity in connection with this Policy that is a violation of the **Foreign Corrupt Practices Act of 1977** (15 USC Sec. 78dd-1, et seq.) which provides for civil and criminal penalties against individuals who directly or indirectly make or facilitate corrupt payments to foreign officials to obtain or keep business. To the best of its knowledge, the performance by the parties of their respective obligations covered or to be covered under this Policy does not and will not violate any applicable law.
- g) transfer of financial records included in this application to private parties or another U.S. Government authority will not be authorized except as permitted under the **Right of Financial Privacy Act of 1978** (12 USC 3401).
- h) the information is being requested under the authority of the **Export-Import Bank Act of 1945** (12 USC 635 et. seq.); disclosure of this information is mandatory **and failure to provide the requested information may result in the Bank being unable to determine eligibility for the Policy.** The information collected will be analyzed to determine the ability of the participants to perform and pay under the Policy. The Bank may not require the information, and applicants are not required to respond, unless a currently valid OMB control number is displayed on this form. The information collected will be held confidential subject to the **Freedom of Information Act** (5 USC 552) and the **Privacy Act of 1974** (5 USC 552a), except as required to be disclosed pursuant to applicable law. The **public burden** reporting for this collection of information is estimated to average 1 hour per response, including time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the collection of information. Send **comments** regarding the burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to Office of Management and Budget, Paperwork Reduction Project OMB# 3048-0009, Washington, D.C. 20503.
- i) the representations made and the facts stated in the application for said Policy are true, to the best of its knowledge and belief, and it has not misrepresented or omitted any material facts relevant to said representations. It agrees that this application shall form a part of the Policy, if issued, and the truth of the representations and facts, and performance of every undertaking in this application shall be a condition precedent to any coverage under such Policy. It further understands that this certification is subject to the penalties for fraud against The U.S. Government (18 USC 1001).

(Signature)

(Print Name and Title)

(Date)

SMALL BUSINESS POLICIES APPLICANT CERTIFICATION

"We are an entity which **together with our affiliates** had **average annual export credit sales** during our preceding two fiscal years not exceeding **\$5,000,000**, excluding sales made on terms of confirmed irrevocable letters of credit (CILC) or cash in advance (CIA)."

(Signature)

Send, or ask your insurance broker or city/state participant to review and send this application to the Ex-Im Bank Regional Office nearest you. Please refer to Ex-Im Bank's website at <http://www.exim.gov> for Regional Office addresses.

Ex-Im Bank reserves the right to request additional information upon review of the application. Please refer to Ex-Im Bank's Short Term Credit Standards (EIB 99-09) to determine the likelihood of approval of a policy.